

# THE MEDICAL NEWS AND LIBRARY.

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TWENTY-FOUR PAGES.

### EPIDEMIC CHOLERA.

*The Cholera.*—The epidemic which we announced in our last month's publication as having invaded this country, has continued to rage with great virulence in Edinburgh, where the number of cases now amounts to between seven and eight hundred (including Leith), of which nearly a half have already proved fatal, about 230 remaining under treatment. A severe epidemic broke out at Loanhead (a village six miles to the south of Edinburgh), and many cases have also occurred at Lasswade, Gilmerton, Portobello, Cockpen, and other villages of the neighbourhood. Several cases have been reported in Glasgow, mostly in very crowded and miserable localities: and the disease is also reported to exist in Dumfries as well as in Falkirk, a town whose sanitary condition is far from satisfactory. In England the number of cases has not approached that of the northern division of the kingdom; and, although in London the number has been considerable, yet, relatively to the population, it is very small compared with Edin-

burgh. On the week ending October 4th, 65 deaths were recorded in the Registrar-General's returns from cholera in London; on November 11th, 62; on November 18th, 54. The epidemic appears, therefore, on the whole, to be decreasing in violence in London. Everywhere the disease appears to have been almost confined to the most wretched and miserable of the population; a few trivial exceptions only to this rule having occurred in London and Edinburgh. The mortality has been everywhere nearly the same,—viz., about two-thirds of the recorded cases which have been brought to a termination. It is probable, however, that no trustworthy returns of the whole cases in any place have been yet published.

On the continent it has declined in a great measure at St. Petersburg, Berlin, and Hamburg, where, however, cases still occur. On the other hand, Rotterdam has been attacked with great severity since the 1st of October, and Dantzic, from a similar date, has suffered under a still more severe visitation. It is stated that in the small town of Gartz, in the district of Stettin,

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there has been the extraordinary mortality of 102 persons out of a population of 700.

A considerable number of cases of a choleroïd disease prevailed in the beginning of the month in Dunkirk; and a few have occurred in the neighbouring villages, and in Calais. M. Magendie was sent by the Academy of Sciences to investigate this alleged ingress of the disease into France; and reported the cases not to be true epidemic cholera. If we may trust the report of a discussion in the *Société de Médecine Pratique*, several cases having the strongest resemblance to the disease appear to have occurred in Paris; but there seems to be, on the part of the French physicians, a strong disposition to doubt or deny its presence.

The General Board of Health has displayed considerable activity, but not all in the right direction. The truth is, that it has been hard beset. Composed, as it is in great part, of non-medical members, and forced to act in an emergency, the single medical head connected with it, has not been able to save it from being thrown upon the suggestions and recommendations of busy-bodies; the effect of which was the framing of a document full of inconsistency, and founded on most imperfect knowledge of the real views of the profession. The College of Physicians of Edinburgh was the first to disclaim the views of the Board of Health, as we noticed in our last number; and this was followed by a most wise and temperate document on the part of the London College of Physicians, recommending hospitals and houses of refuge, and showing the absurdity of the attempt to dictate particular dietetic systems to persons who may be very dependent on many of the forbidden articles. Nearly the whole medical press of the country having likewise joined in tolerable unanimity on this subject, the General Board has been induced to remodel its instructions; and we have now before us a set of additional directions for England and another for Scotland, in which particular orders are given for the construction of cholera hospitals and houses of refuge, and for the employment, where necessary, of additional medical assistance.

We are happy to find that all the medical authorities have agreed to consider the question of contagion an open one, and have concurred expressing sentiments of a moderate character on this subject, closely cor-

responding with those which we endeavoured to impress upon our readers in the last Number of the *Journal*. We hope that in all hospitals and public institutions, facts relating to the propagation of cholera will be scrupulously and carefully recorded. Reports should be drawn up of the *whole* of the nurses and other persons exposed to contagion in such institutions, with the view of ascertaining the proportion in which they are affected with the disease. We believe that a large body of returns of this kind would be of more essential service than any other species of evidence on the subject of contagion.

A committee of the Edinburgh College of Physicians and Surgeons has been appointed, to procure evidence in relation to the present epidemic of cholera in Edinburgh and Scotland. Circulars have been issued to all the medical practitioners in Edinburgh, and the adjoining villages which have been invaded with cholera, enclosing blank schedules, to be filled up with information in a short form, in regard to any cases which may occur. We take this opportunity of impressing upon medical men the importance of attending to this point, as the labours of the committee can only be rendered available for scientific purposes, by the co-operation of a large number of persons; and the trouble imposed on them by filling up the schedules is, from the simplicity with which these are drawn up, extremely trifling.

The most remarkable circumstance as to the treatment of cholera, arising out of the present epidemic, is the employment of the inhalation of chloroform in ten cases successively, in Peckham Asylum, without a single fatal result. This favourable experience has not been borne out in Edinburgh, where this remedy has been very assiduously tried in the Cholera Hospital without the least apparent good effect. The weekly and daily journals are full of remedies, but few of these rest on any large experience.—*Monthly Journ.*, Dec., 1848.

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*Indian Treatment of Cholera.* By SAMUEL ROGERS.—The author insists on the importance of dividing the treatment into two stages, 1st, before the collapse; and 2d, during the collapse.

1st Stage.—*Venesection* has been advocated by many, and very generally practised in this stage of the disease; but to be of service it should be performed early.



before the heat of the body is much diminished, and the skin has become clammy. The blood at first flows with difficulty, is of a dark colour and thick, but in many cases, after a small quantity is drawn, it loses these characters, and becomes florid, the pulse rising in frequency; this I have repeatedly witnessed. Can this change be simply the effect of the abstraction of a few ounces, when the whole circulating fluid is dark alike? Is it not rather produced by the healthy organization of the blood being, in some measure, restored by the operation, the heart itself, relieved of its congestion, being enabled to act with greater vigour? The heart thus freed, by a portion of the vitiated blood being removed, receives a fresh impetus, and if stimulants are given at this time, they are enabled to produce their wonted effects, and the circulation becomes re-established. Bleeding should always be performed in the recumbent posture, as syncope is readily induced by the abstraction of a few ounces of blood in the upright position. The following description of its effects is given by a patient, himself a medical man. "There was a sensation, which I am at a loss to describe, as if my heart was ceasing to beat, and a dread of suffocation; this sensation was instantly relieved by bleeding, and I recovered immediately."

*Emetics* are constantly given in the earlier stages, but their use appears to be based principally on theoretical grounds.

*Calomel*, in large doses, was long a favourite medicine with the older practitioners in India, from an idea that in such doses, in addition to its other effects, it possessed peculiar sedative powers, the usual routine having been to administer calomel ℥i, opii gr. ij immediately, on the patient being seen, and to repeat the dose every hour or two, according to the judgment of the prescriber. It is allowed by every one, that calomel possesses no specific power over the disease, and is useful when combined with opium, in restraining the violent action of the intestines, and allaying emesis; when the violence of the disease subsides, it then exerts its peculiar power in restoring diseased or suspended secretions. The experience of late years, however, has taught us, that the same effects may be produced when this medicine is given in much smaller quantities, whilst large doses are thought by many to hasten death in bad cases; and in those

which recover, the salivation, which it often occasions, retards convalescence. Calomel in small doses is used by most practitioners, and the following formulæ are highly recommended:—calomel, pulv. capsici, āā grs. iv; opii gr. iss or gr. ij; assafœtidæ gr. ij; ol. menth. pip. m. i; to be repeated at intervals whilst purging continues, until 8 or 10 grs. of opium have been taken. Dr. Lorrimer remarks, "I cannot forbear recording my testimony to a combination of medicines, which in warding off and checking an attack of cholera, in numerous instances, both in Europeans and natives, has been followed with the happiest results. The remedy consists of quinine, calomel, and opium, in the quantities of six, four, and two grains respectively, followed by a wine-glass of brandy diluted with a little warm water; this, given within the first hour or two of seizure, will be found in a large proportion of cases, to check the disease (in my own experience it has never failed)."

The combination of *nitro-muriatic acid* and opium has been very extensively tried, and with the best results, the doses being, acid. nitric, m. ij; acid. hydrochlor. m. i; tinct. opii. m. x; water ℥j, to be repeated every hour or hour and a half; the effects are sedative, stimulant, and astringent.

*Sugar of lead and opium* are acknowledged by most practitioners to be one of the best combinations which we possess, in arresting purging, in the premonitory stages of cholera, given in doses of gr. ij of the former, and opium gr. i, repeated according to circumstances.

*Opium*, in some shape or other, enters into most prescriptions, and is of essential benefit in restraining the alvine discharges and stopping emesis; but from the tendency to coma and stupor, in this disease, great caution is necessary in its administration; 8 grs. of solid opium is the largest quantity which I should consider it safe to use during an attack of cholera.

*Stimulants* are of great use in the incipient stages of cholera. Of these the spirit. ammon. aromat., the spiritus ætheris sulphurici, and sp. æth. nitrici are the best, and the carbonate of ammonia and camphor, when we wish to administer stimulants in the solid form for fear of inducing vomiting; quinine, from its influence over the nervous system, appears to possess a certain power in counteracting the effects of the poison, when given in the early stages. The Indian



hemp has also been advantageously used for this purpose, with the effect of almost immediately raising the temperature of the skin.

*2d Stage.*—If the means pointed out fail to arrest the disease in the first stage, little success can be expected from internal remedies when the collapse is fully developed. In the absence of any known antidote against the effects of the poison, our objects must be to endeavour to remove congestion, to arouse the sluggish circulation, and to support the strength until the state of collapse has passed away; to relieve the cramps; and to allay, as far as possible, the urgent thirst. As before remarked, when the powers of absorption are lost, it is worse than useless to pour quantities of medicine into the stomach. Cold diluent drinks, such as lemonade, effervescing draughts of carbonate of soda, and ammonia, and citric or tartaric acid, and soda water or weak nitric acid drink mixed with thin arrow-root, to which may be added a little brandy, are always most grateful to the patient in assuaging thirst; bitter beer and champagne are also very much relished, and are often retained when the stomach rejects every thing else. During the existence of complete collapse stimulants are worse than useless, external applications and enemata being the chief remedies which are beneficial at this period.

*To relieve cramps.*—Frictions with various stimulating embrocations have been recommended, but the annoyance which they cause the patient is quite sufficient to counterbalance the good produced by them. The application of flannel bandages has been found more efficacious for this end than any other mode of treatment. The following method has also been used:—“When spasms are severe in the extremities, the nitric acid applied gently with a feather acts like a charm, and very seldom requires two applications; it should be applied with a very gentle and steady hand, from back to front of the leg. The only objection I have to it is, that when not gently or properly applied, it is liable to cause sloughing and deep ulcerations, which take a long time to heal; but after all it is a satisfaction to possess a remedy capable of relieving the excruciating pain of spasms.” Bags of warm sand applied to the feet, are of service in preserving the heat of the body; frictions of flour or hot ashes over the extremities are also favourite remedies with the natives of

India, and are certainly useful in absorbing perspiration and preventing evaporation.

*Cold baths.*—The cold *douche*, as a remedial agent, is highly recommended, not only in the invasive period, but also in the last stages of disease. I have known the most marked benefit obtained from dashing cold water on the face and head, when the patients were sinking into collapse, and when, except the head, the body was all over cold, and the pulse almost imperceptible; the patients in these cases often expressed themselves revived, and called for its repetition.

The use of hot baths is now relinquished by universal consent, having been found from experience to be injurious in various ways, but chiefly, from the fatigue and upright posture, inducing fatal syncope.

*Saline injections into the veins.*—The immediate, or primary effects, of this remedy was to restore the enfeebled circulation; the action of the heart and arteries being invigorated, and the pulse (which may have previously been imperceptible at the wrist) becoming strong and full. The temperature of the skin also, from being cold and clammy, became warm, and the patient, aroused from a state of almost inanimate collapse, sat up, talked, and expressed himself relieved. This improvement was, however, found to be transitory; symptoms of collapse soon began to return again, the patient became covered with profuse cold sweat, and after relapsing into a state of extreme prostration, the vital powers could not be again stimulated to action.

*Oxygen gas.*—Oxygen gas has been used in the low stages of cholera, with the effect of immediately restoring the heat of the skin and raising the pulse; the inhalation being continued for four or five hours at intervals, whenever the pulse began to flag.

In favourable cases, when the skin has regained its natural heat, and the pulse has improved in strength, if the bowels are not naturally moved, the administration of aperient medicine becomes requisite; small doses of castor-oil and laudanum, or aloes and calomel,  $\text{āā gr. ij.}$ , to be repeated every three hours, are excellent medicines, producing feculent motions without purging. But great caution is necessary in prescribing purgatives, for frequently, after partial reaction has taken place, bile has reappeared in the stools, and the pulse has become perceptible at the wrist, the action of a dose of pulv. jalap. com., or of colocynth, has been



known to produce sudden and fatal relapse. In secondary fever, the treatment must be regulated on general principles, bleeding either local or general, blisters to the nucha, cold lotions to the head, purgatives and mercury, being occasionally requisite to subdue congestion occurring in important organs.—*Reports on Cholera, Madras, 1848.—Month. Retrospect*, Dec. 1848.

## MEDICAL NEWS.

### DOMESTIC INTELLIGENCE.

*Epidemic Cholera.*—As we believe there is no subject of more interest to our readers, at the present time, than this, we have devoted considerable space to it. The disease has appeared at two remote points in our country. At Staten Island it first showed itself among the passengers of a ship from Bremen, about two weeks ago, and a few cases have since from time to time occurred, but it does not seem to show a tendency to spread generally among the inhabitants of the Island. In New Orleans, however, it undoubtedly prevails as an epidemic, and it seems to be rapidly spreading.

*Philadelphia County Medical Society.*—This society is about being organized. A constitution has been adopted, and a meeting will be held on the third Tuesday of January for the election of officers.

*Alleghany County Medical Society.*—A county society has been organized in Alleghany Co., and, in compliance with the 4th sect. of the VI. art. of the Constitution of the State Society, two copies of their Laws have been transmitted to the censors, who have examined and approved of it and sent one copy endorsed with their approval to the corresponding secretary of the state society. This society is the only one in the state which has complied with the section referred to, and is, therefore, the only county society authorized to send delegates to the state society. We beg the early attention of the other county societies to this fact.

*Chester County Medical Society.*—At a stated meeting of the Chester County Medical Society, held on the 31st of October, 1848, W. W. Townsend, J. Thomas, E. F. Rivinus and A. Murphy, were appointed delegates to the annual meeting of the

American Medical Association, to be held at Boston on the first Tuesday of May next; and S. H. Harry, J. R. Walker, E. Harvey and W. Worthington were appointed delegates to the annual meeting of the Medical Society of the State of Pennsylvania, to be held at Reading on the second Wednesday of April next.

Each delegation was empowered to fill any vacancy that may occur in their body.

WILMER WORTHINGTON, *Rec. Sec.*

*Medical Society of Madison County Alabama.*—At a Medical Convention held in Huntsville on the 2d of October last, it was determined to form a County Medical Society, and a committee was appointed to aid in the accomplishment of this object.

At a subsequent meeting, this committee submitted a report with a Constitution and by-laws, which were adopted, and a society organized by the election of Dr. F. Jordan, *President*, F. H. Newman, *Vice Pres.*, and Dr. J. N. Basset, *Sec.*

The committee have made a long report, from which we give the following extract:

"In our country we find not only the illiterate and simple indulging their proverbial penchant for the wonderful, and for the miraculous in medicine, but school teachers, the nursery men and women of our children's minds fascinated by some modern amulet; as though it were a formula for resolving the quadrature of the circle—with one hand calmly certifying to the ability of a quack, or the efficacy of a nostrum, and with the other chastening a child because it does not seem to comprehend an elementary principle of science.

"Here we see Revd. Clergymen, who should be the guardians of our morals, forgetting that as 'dead flies cause the ointment of the Apothecary to stink, so doth a little folly, him that is reputed for wisdom'—gazing with admiration on some *Abracadabra* of the nineteenth century as though it were a new revelation, and bolstering with fulsome affidavits a mercenary and ignorant pretender, or a worthless and infamous product of empiricism, to the great detriment of our useful and of their sacred calling;—while physicians have almost universally recognized the injunction of Ezra that 'on Ministers of the house of God it shall not be lawful to impose tribute or custom,' *flagellum qui meruit ferat*. Such we recommend to preach from the xix Psalm: 'Keep thy ser-



vant also from presumptuous sins,' and expose 'the sin of presuming to hold and to teach opinions upon which we have not qualified ourselves to have any opinions at all.'

"Here the daily newspaper, the mouth-piece of popular opinion, literally thrusts the most obscene and filthy specimens of quackery into the eyes, if not down the throats, of its patrons. Presidents, forgetting that the virtue of 'the royal touch' has vanished with other of the 'divine rights of kings,' have laid their potent hands upon it.—Grave and reverend statesmen, who stand in the van of civilization, seem to have forgotten that a division of labour is the great secret of its advancement, or that medicine has not fallen to their lot.—Dignified judges, and learned jurists, with lawyer-like acumen, seem to think that bearing false witness for a neighbour is not against the statute of Moses. Thus have all in some manner invoked and returned thanks to this golden calf. \* \* \*

"This state of things is the effect of some precedent state of things, and your Committee, on mature reflection admit, that it may be in part the legitimate effect of our imperfect mode of teaching medicine; and this crying evil we believe to be owing to the multiplication of Medical schools in the land, and to their disgusting and farcical competition, underbidding their sister colleges even like their alumni underbid each other, and inducing pupils by reducing their requirements, until one might imagine that death and the devil had conspired to charter them.

"A young physician who has received but a moderate preparatory education, spent a few months with a medical preceptor educated like himself, and a few more at a college that has been too indulgent to ask many questions, feels, and the public feel, his want of professional qualifications; he is unable to compete with the accomplished physician who is respected for his ability, on the one hand—or with the shrewd empiric, who is prospering, on the other.—If he is an honest man, he looks to his right hand neighbour, and strives, is mortified, for being without straw, he can make no bricks—and gives up in despair;—but if he is not honest, he looks to his left hand neighbour, with whom he is qualified to compete or rather to imitate, and becomes a licensed, or regular bred quack—a disgrace to his Alma Mater in his manhood, because she required too little of him in his youth. It is this kind of quackery

that we are most infested with, of which the profession has the most right to complain, and which alone at present we feel competent to correct."

#### FOREIGN INTELLIGENCE.

*Death from Chloroform.*—On Tuesday last, Mr. Carruthers, a gentleman of fortune, residing at Dormount, Annan, lost his life from the incautious application of chloroform. It appears that he was afflicted with asthma, and having found relief from inhaling the subtle vapour, had frequent recourse to it. Being an expert angler, he sometimes employed himself rather late in adjusting his hooks and making artificial flies. On Tuesday morning he was found sitting at the table apparently following this occupation, in the position in which his servant had left him on the preceding night, but it was soon discovered that life had been extinct probably for some hours. On the table was the handkerchief which he had used in applying the chloroform to his mouth.—*Lancet*, Nov. 18, 1848, from *Carlisle Patriot*.

*Malposition of the Abdominal Viscera.*—In a case of sudden death, Mr. Robbs found the liver occupying the whole of the left hypochondriac, epigastric, and part of the right hypochondriac regions; the organ was double its natural size. The stomach and spleen were in the right hypochondriac region; the cardiac extremity of the stomach was on the right, and the pyloric extremity on the left. The cæcum and appendix vermiformis were in the left iliac region.—*Med. Gaz.*, July 21, 1848.

*Operation for Hare-lip.*—M. GUERSENT, who has had extensive opportunities of judging of the most favourable period for operating in hare-lip, gives the preference to the period recommended by Dubois, during the first fortnight after birth. He advises against undertaking the operation when the child is about a year old, or during the process of dentition. It may again be performed with much greater hope of success when the child has attained the age of five or six years. Dieffenbach latterly gave a similar preference to the early operation.—*Gaz. des Hôp.*, in *Month. Journ.*

*Cure of Hydrocele by Compression.*—M. Rossi relates the case of a man labouring



under hydrocele, who consulted him after he had been punctured several times. A perfect cure was obtained by compression of the tunica vaginalis, by means of a sheet of lead applied on each side of the scrotum, precaution being taken not to interfere with the cord or testicle.—*Annali Universali*.

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*Professor Mulder's Chemical Counterblast against the Potato as an article of Diet.*—In a work recently published, Mulder, the learned Professor of Utrecht, has put forth a counterblast against the potato. As an article of diet, he regards it as innutritious, and contends that it is the cause of the moral and physical degeneration of those nations which use it as food! He admits that life may be supported on potatoes alone; but it is not an elastic or healthy life! In fact, the potato fills the stomach with a mass of provender, from which but little healthy nutriment can be extracted. He contends that we shall never see the abuse of spirituous liquors got rid of until potatoes are abolished as a common article of food, on the principle that a certain amount of stimulus is indispensable, and that therefore the ignorant will have recourse to one that is destructive to them, so long as a salubrious excitement is denied.

All this is, chemically speaking, very ingenious; but we cannot agree in the inference. Potatoes, as an adjunct to animal food, are, we consider, highly serviceable to the support of the system; and we think a person would thrive upon such food much better than upon a concentrated essence of Mulder's favourite *protein*, or its compounds. It does not at all follow that substances holding but little nitrogen and sulphur are unadapted to the support of the system; nor is it to be admitted, that bodies which abound in these elements, are thereby fitted to sustain life in its maximum of integrity. Such wild inferences are the result of the ultra-chemical views which Liebig and Mulder are disposed to force on physiologists. Experience is against the first assumption; and if the second were true, *gutta percha*, *caoutchouc* and *urea* might take the place of beef, mutton, and pork, when these sources of food were deficient!—*Lond. Med. Gaz.*, Sept., 1848.

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*Amputation of the Thigh at the Hip-joint.*—M. GUERSENT operated, on the 28th December, 1847, for a cancerous affection of

the femur by disarticulation at the hip-joint. The child, aged 5, was very much reduced. He was put under the influence of chloroform—insensibility was complete in two minutes. The operation lasted only two minutes. When the ligature was being placed on the vessels the child became pale, a little foam came from the mouth, the eyes were turned up, and the pulse at the wrist disappeared. This state of syncope was dissipated by means of active ventilation, and the introduction of a few spoonfuls of wine into the stomach—and the child began to cry, much to the relief of the surgeon. Twenty-two days after the operation the child was as well as possible.—*Prov. Med. and Surg. Journ.*, Nov. 15, 1848, from *Journ. de Méd. et de Chir.*, Feb., 1848.

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*Medical Journalism in Italy.*—Our readers will be surprised at the following numerous list of medical journals and transactions of medical societies, published in Italy. Three appear in the Papal states, *Il Bollettino Medico of Bologna*, *Gli Annali Medico-Chirurgici of Rome*, and *Il Raccogli-tore Medico of Fano*; three in the Neapolitan states, *L'Osservatore Medico*, *Il Filiale Sebezio*, and *Il Sarcone*; two in Lombardy, *Gli Annali Universali di Medicina*, and *Gazetta Medica of Milan*; three in Tuscany; one in Piedmont, *Journal de la Société Medico-Chirurgicale de Turin*; lastly, two in the Venetian states, *Il Giornale per Servire ai Progressi*, and the *Memoriale della Medicina Contemporanea*: in all fourteen, and we believe the names of two or three are omitted. This formidable *journalistik* is one among other injurious effects of the subdivision of Italy into so many independent principalities, each of which must have its medical school and journal. The consequence of this ruinous competition is a great dearth of good original matter, and, generally speaking, a low standard of excellence in the majority of the publications above named, which consist chiefly of extracts from foreign, and more especially the English journals. In the pages of two or three, however, which form honourable exceptions to this remark, may be found valuable contributions to medical science.—*Monthly Journ.*, Dec., 1848.

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*Medical Education in Turkey.*—The progress of civilization in Turkey, of late years, is very remarkable, and the advance of medi-



cal organization and education especially so. The state takes upon itself the choice and the instruction of its people in medicine. A general order has been issued to each district of the empire, to send up six young men for medical instruction. The candidates are formed into three great classes: 1, elementary, where the general education is attended to, in the Turkish, Arabic, and French languages, in history, geography, &c.; 2, a class of medicine and surgery; and 3, one of pharmacy for apothecaries. Those intended for physicians are to spend four years in the elementary and four in the medical and surgical classes. The pharmaceutical course occupies two years, after the conclusion of attendance in the elementary class. Pupils pass from one class to another by examination. The medical school of Galata-Serai has hitherto been the only one; but a new institution is nearly completed, a medico-chirurgical academy, which will take the name of its founder, the reigning sultan, Abdul Medjid. When the latter college is inaugurated, the old school of Galata-Serai will serve for the preparatory studies only, and from it students who have received certificates in arts will pass on to their medical or pharmaceutical studies in the academy. Turkish improvements are arrested on one subject by the inveterate prejudices of the people—viz: in that of midwifery, for the practical study of which no opportunities are afforded. Still, as the difficulties in the way of practical anatomy have vanished, and that in a much less time than might have been expected, considering all things, so we may also hope that, ere long, the onward progress of knowledge will also sweep away the difficulties in the way of the obstetric art in Turkey.

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*Chloroform in Cholera.*—Dr. CLUTTERBUCK stated at the Medical Society of London, that he had observed the greatest benefit from chloroform in cholera. The spasms and pain were almost immediately relieved, and the patients became composed.

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*Progress of Cholera.*—Dr. Taylor, in a Report from the Committee of Public Health, stated, that the total number of cases admitted into the Cholera Hospital of *Edinburgh*, from the 30th October, the date of the commencement of the Epidemic, was 177, of whom 106 had died, 57 had been cured, 2 had been sent to the Infirmary as

not being cholera cases, and 12 were still under treatment. With respect to the habits of the persons admitted, he might state, that out of 127 of them, there were 42 males and 85 females, of whom 15 males and 15 females were of dissipated habits; 3 males and 22 females were of irregular habits; 2 males and 14 females were doubtful in their habits; and 22 males and 34 females were of sober habits; but out of the latter class had to be deducted 12 boys and 15 girls under 14 years of age, which, therefore, left a very small proportion of sober people. Still later accounts show an increase both in the number of cases and of the mortality.

The total number of cases at *Leith* have been 298, deaths 115, recoveries 175, remaining 8.

The disease prevails at Glasgow, Bells-hill, Coldstream, Kelso, Dumfries. Scarcely any town of the same size suffered so much from cholera as Dumfries in 1832; and at this time its ravages are more extensive than anywhere else in Britain, in proportion to the population. The disease manifested itself there for the first time on this occasion on the 16th of November. There have been only two cases in Maxwelton. Up till Friday last, there had been seventy-nine cases in all, and thirty-two deaths.

Since the commencement of November the cholera has re-appeared at St. Petersburg, where it rages at present with more intensity than in July. Amongst the first victims were an aid-de-camp of the Emperor, and M. Lejars, formerly an equestrian at the Cirque in the Champs Elysées, and who was director, when he died, of the Circus at St. Petersburg.

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*Obituary Record.*—Died in London, on the 3d of December, in the 68th year of his age, Samuel Cooper, Esq., F. R. S., late Professor of Surgery in University College, and well known in this country by Surgical works.

— on the 5th December, John Clendinning, Esq., M. D., F. R. S., in the 51st year of his age.

— at Brighton, on the 17th of Nov., Thomas Callaway, aged 58, for many years one of the Assistant Surgeons of Guy's Hospital.

— at Dublin, on the 11th Nov., Dr. Renny, late Director General and Chief of the Army Medical Department in Ireland, aged 92.